

D.I. # _____

CIVIL ACTION

NUMBER: 06cv181 GMS

U.S. POSTAL SERVICE
CERTIFIED MAIL RECEIPT(S)

7002 2030 0003 0326 9540

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com ®	
OFFICIAL USE	
Postage	\$.63
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.88
Sent To WARDEN TOM CARROLL DELAWARE CORRECTIONAL CENTER 1181 PADDOCK RD. SMYRNA, DE 19977	

PS Form 3800, June 2002 See Reverse for Instructions